

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Electrical Contractors Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Friends of Ray LaHood

Mailing Address 3311 N. Sterling Ave #10

City Peoria State IL Zip Code 61604

Purpose of Disbursement

Candidate Name  
Ray LaHood

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 18

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 24809957

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B.** LoBiondo for Congress

Mailing Address P.O. Box 16021

City Alexandria State VA Zip Code 22302

Purpose of Disbursement

Candidate Name  
Frank LoBiondo

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 2

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 24809447

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.** Friends of Jim Saxton

Mailing Address P.O. Box 795

City Mount Holly State NJ Zip Code 08060

Purpose of Disbursement

Candidate Name  
Jim Saxton

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 3

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 24809448

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....